

## SUPPLEMENTAL APPLICATION DATA SHEET

## **Application Information**

Application Number::	<u>10/816,880</u>
Filing Date::	April 5, 2004
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	<u>3683</u>
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	VEHICLE BRAKE DEVICE
Attorney Docket Number::	033498-026
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	

Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Masahiko
Middle Name::	
Family Name::	KAMIYA ·
Name Suffix::	
City of Residence::	<u>Anjo</u>
State or Province of Residence::	Aichi
Country of Residence::	Japan
Street of Mailing Address::	c/o ADVICS CO., LTD., 2-1, Asahi-machi
City of Mailing Address::	Kariya
State or Province of Mailing Address::	Aichi
Country of Mailing Address::	Japan

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Hiroshi
Middle Name::	
Family Name::	KONDO
Name Suffix::	
City of Residence::	Chiryu
State or Province of Residence::	Aichi
Country of Residence::	Japan
Street of Mailing Address::	c/o ADVICS CO., LTD., 2-1, Asahi-machi
City of Mailing Address::	Kariya
State or Province of Mailing Address:: Aichi	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Shin
Middle Name::	
Family Name::	SASAKI
Name Suffix::	

City of Residence::

<u>Okazaki</u>

State or Province of Residence::

Aichi

Country of Residence::

Japan

Street of Mailing Address::

c/o ADVICS CO., LTD., 2-1, Asahi-machi

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City of Mailing Address::

Kariya

State or Province of Mailing Address:: Aichi

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing

Address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Japan

Status::

**Full Capacity** 

Given Name::

Daizo

Middle Name::

Family Name::

OBA

Name Suffix::

City of Residence::

**Kariya** 

State or Province of Residence::

<u>Aichi</u>

Country of Residence::

Japan

Street of Mailing Address::

c/o ADVICS CO., LTD., 2-1, Asahi-machi

City of Mailing Address::

Kariya

State or Province of Mailing Address:: Aichi

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing

Address::

**Correspondence Information** 

Correspondence Customer Number:: 21839

(703) 836-6620 Phone Number::

Fax Number: (703) 836-2021

**Representative Information** 

21839 Representative Customer Number::

**Domestic Priority Information** 

Continuity Type:: Parent Application:: Parent Filing Application::

Date::

**Foreign Priority Information** 

Filing Date:: **Priority** Country:: Application Number::

Claimed::

04/10/03 Yes 2003-106724 Japan

**Assignee Information** 

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing

Address::